

08-18-03

GP/1624

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PTO/SB/2F (08-00)

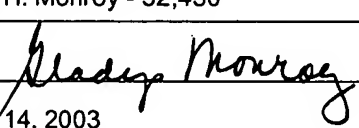
Approved for use through 10/31/2002. OMB 0651-0031

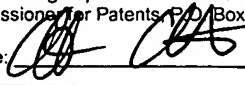
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<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="margin: 5px 0 0 40px;">(to be used for all correspondence after initial filing)</p>		Application Number	10/057,847
		Filing Date	January 25, 2002
		First Named Inventor	Jordi GRACIA FERRER
		Group Art Unit	1624
		Examiner Name	Mark L. Berch
Total Number of Pages in This Submission	18 + priority doc	Attorney Docket Number	251502007500

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form – in duplicate - 2 pgs <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (Response to Restriction Requirement) - 2 pgs <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition – under 37 CFR 1.78(a)(3) - 2 pgs <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney – 2 pgs, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) <div style="margin-top: 10px;"> * Preliminary Amendment (3 pgs) * Supplemental Application Data Sheet (3 pgs) * Executed corrected Declaration (3 pgs) * Return receipt postcard </div>
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;">Remarks</div> <div style="width: 70%; text-align: center;"> <h2 style="margin: 0;">RECEIVED</h2> <p style="margin: 5px 0 0 0;">AUG 20 2003</p> <p style="margin: 0 0 0 0;">OFFICE OF PETITIONS</p> </div> </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual Name	MORRISON & FOERSTER LLP Gladys H. Monroy - 32,430	Customer Number: 25226
Signature		
Date	August 14, 2003	

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Certificate No. EV 332778979 US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA , 22313-1450, on the date shown below.		
Dated: <u>8-14-03</u>	Signature: 	(Anthony Soljanich)



PTO/SB/17 (01-03)
Approved for use through 04/30/2003. OMB 0651-0032
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FEE TRANSMITTAL for FY 2003		Complete if Known	
Patent fees are subject to annual revision.		Application Number	10/057,847
		Filing Date	January 25, 2002
		First Named Inventor	Jordi GRACIA FERRER
		Examiner Name	Mark L. Berch
		Group Art Unit	1624
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	251502007500
TOTAL AMOUNT OF PAYMENT (\$)		1300.00	

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																																																																																																																																																																																		
<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None</div><div><input checked="" type="checkbox"/> Deposit Account</div></div> <div style="margin-top: 5px;">Deposit Account Number: 03-1952</div> <div style="margin-top: 5px;">Deposit Account Name: Morrison & Foerster LLP</div> <div style="margin-top: 5px; font-size: 0.7em;">The Commissioner is hereby authorized to: (check all that apply)</div> <div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> Charge fee(s) indicated below</div><div><input checked="" type="checkbox"/> Credit any overpayments</div></div> <div style="margin-top: 5px;"><input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application</div> <div style="margin-top: 5px;"><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</div>		<div style="font-weight: bold;">3. ADDITIONAL FEES</div> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.7em;"><thead><tr><th colspan="2">Large Entity</th><th colspan="2">Small Entity</th><th rowspan="2">Fee Description</th><th rowspan="2">Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th></tr></thead><tbody><tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr><tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr><tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr><tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for ex parte reexamination</td><td></td></tr><tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr><tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr><tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr><tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td><td></td></tr><tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td><td></td></tr><tr><td>1254</td><td>1,450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr><tr><td>1255</td><td>1,970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr><tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr><tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr><tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr><tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr><tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr><tr><td>1453</td><td>1,300</td><td>2453</td><td>650</td><td>Petition to revive - unintentional</td><td></td></tr><tr><td>1501</td><td>1,300</td><td>2501</td><td>650</td><td>Utility issue fee (or reissue)</td><td></td></tr><tr><td>1502</td><td>470</td><td>2502</td><td>235</td><td>Design issue fee</td><td></td></tr><tr><td>1503</td><td>630</td><td>2503</td><td>315</td><td>Plant issue fee</td><td></td></tr><tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr><tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr><tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr><tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr><tr><td>1809</td><td>750</td><td>2809</td><td>375</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr><tr><td>1810</td><td>750</td><td>2810</td><td>375</td><td>For each additional invention to be examined (37CFR 1.129(b))</td><td></td></tr><tr><td>1801</td><td>750</td><td>2801</td><td>375</td><td>Request for Continued Examination (RCE)</td><td></td></tr><tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr><tr><td colspan="4">Other fee (specify) <u>1454 (1.17(i)) Acceptance of an unintentionally delayed claim for priority</u></td><td>1300.00</td></tr><tr><td colspan="4" style="text-align: right;">*Reduced by Basic Filing Fee Paid</td><td></td></tr><tr><td colspan="4" style="text-align: right;">SUBTOTAL (3) (\$)</td><td>1300.00</td></tr></tbody></table>		Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1051	130	2051	65	Surcharge - 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<div style="font-weight: bold;">2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</div> <div style="margin-top: 5px; font-size: 0.7em;">Total Claims 20 -20** = 0 x 18.00 = 0.00</div> <div style="margin-top: 5px; font-size: 0.7em;">Independent Claims 1 -3** = 0 x 84.00 = 0.00</div> <div style="margin-top: 5px; font-size: 0.7em;">Multiple Dependent - previously paid 280.00 = 0.00</div> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.7em; margin-top: 5px;"><thead><tr><th colspan="2">Large Entity</th><th colspan="2">Small Entity</th><th rowspan="2">Fee Description</th><th rowspan="2">Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th></tr></thead><tbody><tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr><tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="4" style="text-align: right;">SUBTOTAL (2) (\$)</td><td>0.00</td></tr></tbody></table> <div style="margin-top: 5px; font-size: 0.6em;">**or number previously paid, if greater; For Reissues, see above</div>		Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1202	18	2202	9	Claims in excess of 20		1201	84	2201	42	Independent claims in excess of 3		1203	280	2203	140	Multiple dependent claim, if not paid		1204	84	2204	42	** Reissue independent claims over original patent		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2) (\$)				0.00
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Gladys H. Monroy	Registration No. (Attorney/Agent)	32,430
Signature		Telephone	(650) 813-5711
		Date	August 14, 2003